U.S. Department of Labor Offi/____f La_or-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 13556	2. Fiscal Year Covered From:	
·	1 / 1 / 2004 Through: 12 / 31 / 2004	
3. Name and address of person filing.	4. Name, file number, and address of labor organization.	
Name Benjamn \ Perez	Name Landscape/Irrigation Local 345	
	Labor Organization File Number 06306 \$\frac{1}{2}\$	
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any	
Street 142 W Pomona ave	Street 142 W Pomona ave	
City Monrovia	city Monrovia	
State (CQ). ZIP Code + 4 9 1 0 6	State C. Q. ZIP Code + 4 9/016	
5. Position in labor organization. 99-ent/ocganiz	7.p. (
A. Held an interest in, engaged in transactions (including loans) with, c monetary value from an employer whose employees your organiza 6. Name and address of Employer (including trade name, if any).	ion represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income.	
Name		
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
1.O. Box, Didg., Rodill No., ii ally	7.b. Amount.	
Street		
City		
State ZIP Code + 4		
Signature		
15. Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompandersigned's knowledge and belief, true, correct, and complete. (See the second contained in this report is not supported by the second contained in the second contained contained in the second contained co	of Perjury and other applicable penalties of the law, that all of the information	
and a support of the	section on penalties in the instructions.)	

Name of Person Filling Ben, amin Yevel	File Number U-		
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.			
8. Name and address of Business (including trade name, if any). Name apprentice & Journey Mentraining trust Fund Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 18931 Laurel Park Road City Compton State C9. ZIP Code + 4 90220	9. Business deals with: a. Labor Organization b. Trust c. Employer		
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City ZIP Code + 4	11.a. Nature of such dealing. QPPrentice Instructor 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. Scilary		
	12.b. Amount.	425100	
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.			
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	14.a. Nature of payment.		
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.		